

**MONTANA BEHAVIORAL INITIATIVE
MONTANA OFFICE OF PUBLIC INSTRUCTION
2009 AWARD NOMINATION FORM**

NAME OF NOMINATOR: _____

ADDRESS OF NOMINATOR: _____

CITY _____ **STATE** _____ **ZIP** _____

TELEPHONE _____ **EMAIL** _____

NAME OF NOMINATED SCHOOL

ADDRESS OF NOMINATED PROGRAM

CITY _____ *STATE* _____ *ZIP* _____

TELEPHONE _____ *EMAIL* _____

DESCRIBE WHY YOU BELIEVE THIS SCHOOL DESERVES THIS AWARD: *(Attach additional sheets, if necessary.)*

TRAINING _____

TEAM _____

EVALUATION _____

PROACTIVE SUPPORT SYSTEMS

COMMUNITY PROCESS

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